

Definition of Eligible Dependents

→ Review the following definitions to determine if your dependents are eligible for District health benefit coverage.

Definition of your Spouse

Your lawfully married spouse. Your ex-spouse is not an eligible dependent.

Definition of your Child(ren) or Domestic Partner's Child(ren)

Your unmarried children who are:

- Your biological child(ren); or
- Your legally adopted child(ren), or a child for whom you are in anticipation of adopting; or
- Your stepchild(ren) for whom you have more than 50 percent legal responsibility. Stepchildren must reside with you and can claim as an IRS dependent; or
- A child for whom you have legal guardianship or have been awarded legal and physical custody of the child pursuant to a valid court order; or
- A child for whom you have a National Qualified Medical Support Order (NQMSO).

You can cover your—or your domestic partner's—unmarried child(ren) if they:

- Are under the age of 19; or
- Are under age 24 and are full-time students (minimum 12 semester units) at an accredited school or college; or
- Were covered under the District's plans before age 19, and they became incapable of self-sustaining employment due to a disability; **or**
- Are permanently disabled and were continuously enrolled in the District's plans before age 19; or
- Are dependent children for whom you have been ordered by the Court to provide coverage prior to age 19; or
- Are dependent children for whom you have a NQMSO between age 19-23.

No Employee/Retiree may be a dependent on his/her Spouse/Domestic Partner's plan, except as administratively joined by the District. Where a married couple or Employee/Retiree and Domestic Partner each choose the same plan, the District may administratively join the two individuals, and any qualifying dependents on one plan with one Employee/Retiree identified as a dependent of the other. The District reserves the right to determine if, and how, to administratively join the plans.

If your dependent child accepts a job with the District or is currently an employee of the District and is benefits-eligible, you must drop your child from your coverage, and your child must enroll for his/her own coverage.

Definition of your Domestic Partner

You and your partner are of the same gender and both of you meet all of the following criteria:

- You and your domestic partner have a completed Certificate of Domestic Partner form on file with the District;
- You currently share a regular and principal residence for at least the last 12 months;
- You are engaged in an exclusive committed relationship for mutual support and benefit to the same extent as married individuals;
- You and your domestic partner are jointly responsible for basic living expenses;
- Neither you nor your domestic partner is legally married to another person or have a signed declaration of domestic partnership with another individual in the previous 12 months;
- You are at least 18 years old and mentally competent to consent to contract;
- You are not related by blood to a degree of closeness that would prohibit marriage were you of the opposite sex;
- You must be financially interdependent as proven by the required documentation.

NOTE: The additional coverage for the domestic partner and/or your partner's child becomes a taxable benefit. (Imputed income is separate from your monthly plan cost.) The amount of your imputed income depends on the plan in which you are enrolled and the level of your coverage. Imputed income is taxable. Hence, domestic partner's benefits are not subject to the DEA process.

Dependent coverage for the 2009-10 Plan Year ends September 30, 2010.

• Dependent coverage effective October 1, 2010 requires that employees/retirees to qualify their dependents through the DEA process by the deadline of September 30, 2010.